

## Form CPF M 102: Campaign Finance Report Municipal Form

FITCHBURG CITY CLERK

of Messechusetts	1 2012 JAN 21	ط نا	າ.	A	File	with: City or	r Town Clark or Electi	on Commission
Fill in Reporting Period dates:	Beginning Date:	1/1	/1t	Ub	Ending Da	I	31/\$\$	]
Type of Report: (Check one)  8th day preceding preliminary	8th day preceding ele	ction		] 30 day a	fter election	🔀 year-en	d report 🔲 dis	solution
E. Thomas Donnelly			ן ור	Committ	ee to Elect Torn I	Connelly	**************************************	
Condidate Full Name	; (if applicable)			L		Committee No	anc	
Mayor of Fitchburg				Joanne L	. Donnelly			
Office Sought a	nd District				Name	of Committee	: Tressurer	
1197 Main Street, Fitchburg, MA 014	20	······································		1197 Ma	in Street, Fitchbu		**************************************	
Residential /		<del>in rijelja seran</del> j			Com	mittee Mailing		····
Telephone Number (optional):	(978) 342-1122		_}	Telephone	Number (optional):		(978) 342-1122	
	SUMMARY BA	LAN	ici	INFOR	MATION:			l
Line 1: Ending Ba	lance from previous rep						230.93	
Line 2: Total recei	pts this period (page 3,	line 1	1)				0	
Line 3: Subtotal (l	•			į			230,93	
Line 4: Total expe	nditures this period (pa	ge 5, 1	line	14)			0	
Line 5: Ending Bu	dance (line 3 minus line	; 4)					230.93	
Line 6: Total in-ki	ind contributions this pe	eriod (	(pag	(e 6)			9	
Line 7: Total (all)	outstanding liabilities (	page	7)	}			30020	y N
Line 8; Name of b	oank(s) used: Rollstone E	Bank a	nd T	rust				Ĵ
Affidavit of Committee Treasurer:  1 certify that I have exemined this report inclusions forms, for finance cotivity of all persons acting under the Signed under the paralities of perjury:  FOR CANDIDATE FILINGS ON  Candidate with Committee and use act I certify that I have exemined this report activity, of all persons acting under the a incurred any liabilities nor made any exp  Candidate without Committee OR candidate without ca	cipts, expenditures, disburspaper authority or on behalf of this or Livity independent of the communicating attached schedules an authority or on behalf of this comenditures on my behalf during the middless with independent activities and the communications attached schedulers and the communications attached schedulers and the communications are considered.	(check dities dities in the report of the re	indesic in a second of the sec	contributions and appropriate the contributions of the contributions of the contribution of the contributi	and liabilities for the ith the requirements ( Treasurer's convicting and belief, the requirements of the	reporting party of M.G.L. o. 55 signature) a true and com M.G.L. o. 55.	Date: 1/14/12  Date: 1/14/12  plets statement of all stat	numpaign finance () contributions,
Signed under the penalties of perjury:	Thomas	C	S	ml	Condidate's		Date: 1/14/1	Ł



# Form CPF M 102: | Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

es estimanistana assi			Fil	e with: City	or Town Clerk	c or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/	1/11;		Bnding Da	to: 12	/31/31	
Type of Report: (Check one)  Sth day preceding preliminary Sth day preceding election		30 day aft	er election	⊠ year-e	and report	dissolution
E. Thomas Donnelly		Committee	e to Elect Tom	Donnelly		
Candidate Pull Name (if applicable)	-       -		, <u>, , , , , , , , , , , , , , , , , , </u>	Committee	Name	The state of the s
Mayor of Fitchburg	- F	oanne L	Donnelly			
Office Sought and District			Name	e of Commit	loo Trossurer	
1197 Main Street, Fitchburg, MA 01420		197 Main	Street, Fitchbi	urg, MA		
Rosideatial Address			Con	amitte <b>o Ma</b> il	ing Address	
Telephone Number (optional): (978) 342-1122	T	olophono Ni	ombar (optional):		(978) 34	2-1122
SUMMARY BALAI	NCE I	NFOR	MATION:			
Line 1: Ending Balance from previous report					230.	93
Line 2: Total receipts this period (page 3, line	11)					0
Line 3: Subtotal (line 1 plus line 2)					230.	93
Line 4: Total expenditures this period (page 5,	line 14	4)			*****	
Line 5: Ending Balance (line 3 minus line 4)					230.	93
Line 6: Total in-kind contributions this period	(page	6)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Line 7: Total (all) outstanding liabilities (page		<u> </u>			300	
Line 8: Name of bank(s) used: Rollstone Bank	ond Tru	est				
Affidavit of Consulties Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, loans, receipts, expenditures, disbursements, infinance activity of all persons acting under the authority or on behalf of this committee.	THE LEGISLE		p the tedinements	ofM.GL. c.	55.	fall compaign finance sents the compaign
Signed under the penalties of perjury:		,	(Treasurer's	reignature)	Date:	1,17,16
FOR CANDIDATE FILINGS ONLY: Attidavit of Candidate: (check Candidate with Committee and no activity independent of the committee						
I certify that I have examined this report including attached schedules and it is, notivity, of all persons acting under the authority or on behalf of this committee incurred any liabilities nor made any expenditures on my behalf during this rep	outhfil be mission	riod.	ate tedan emones or	, a true and o M.G.L. o. 5	omplets statem 5. I have not re	ent of all compaign finan- socived any contributions
Candidate without Committee OR Candidate with independent activity fill  I certify that I have examined this report including attached schedules and it is, finance activity, including contributions, loans, receipts, expenditures, disburse company finance activity of all persons acting under the authority or on behalf	to the be	st of my kni Lind contri	ovicage and liabilit			
Signed under the penaltics of perjury:		•		's signoture)	***	1/14/12
V			·		400	

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	ease include your committee name and a pa  Name and Residential Address  (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
Pate Received	(aiphabetical listing required)				
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		716			
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		<u> </u>			
		111			
			<b>    </b>		
L					
Line 9: Total Re	ceipts over \$50 (or listed above)				
Line 10: Total Re	eceipts \$50 and under* (not listed above)				
	PECEIDIC IN THE PERIOD		○ ← Enter on page 1, line 2		
Line 11: TOTA	L RECEIPTS IN THE PERIOD	·	hould include only those receipts not itemized above.		

## SCHEDULE A: RECEIPTS (continued)

) (. D	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
Date Received	(aiphadenear iisting required)				
		]			
<u> </u>					
			0		
	eceipts over \$50 (or listed above)				
Line 10: Total R	eceipts \$50 and under* (not listed above)				
	A DESCRIPTS IN THE PERIOD		Enter on page 1, line 2		
* If you have item	ized receipts of \$50 and under, include them i	n line 9. Line 10 sh	ould include only those receipts not itemized above.		

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	Expenditures" attachment is availitures. Please include your comm  To Whom Paid  (alphabetical listing)		ress		Purpose of Expenditure	Amount
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			<del></del>			
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			1			
			: :			
			! !			
		Line 12: Te	tal Expendit	ures ove	er \$50 (or listed above)	
					and under* (not listed above	/e)
	Enter on page 1, line 4	→ Line 14: T	OTAL EXP	: 13 ek	URES IN THE PERIOD	ditures not itemiz

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4

## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Add	ess	Purpose of Expenditure	Amount
			, , , , , , , , , , , , , , , , , , ,		
				## ## (or listed above)	
				ver \$50 (or listed above) 50 and under* (not listed above)	
			OTAL EVEL	ENDITURES IN THE PERIOD	
	Enter on page 1, line	4 → Line 14: 1	m in line 12 L	ine 13 should include only those exp	enditures not itemi

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those exp Page 5

above.

### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

ate Incurred	To Whom Due	Address	Purpose	Amount
9/29/99	E. Thomas Donnelly	149 Prospect Street, Fl	tchburg	9500
3/21/03	E. Thomas Donnelly	149 Prospect Street, Fi	Itchburg	200
10/21/03	E. Thomas Donnelly	149 Prospect Street, F	itchburg	300
1/26/04	E. Thomas Donnelly	149 Prospect Street, F	Itchburg	1520
10/06/04	E. Thomas Donnelly	149 Prospect Street, F	Fitchburg	2000
10/31/05	E. Thomas Donnelly	149 Prospect Street, F	Fitchburg	1500
6/29/07	E. Thomas Donnelly	149 Prospect Street,	Fitchburg	5000
10/25/07	E. Thomas Donnelly	149 Prospect Street,	Fitchburg	10000
		7 - Tine 18. TOTAL.	OUTSTANDING LIABILITIES	(ALL) 30020